SERFF Tracking Number: MDIC-125838204 State: Arkansas
Filing Company: Medico Life Insurance Company State Tracking Number: 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 992MLIC0908

Project Name/Number:

## Filing at a Glance

Company: Medico Life Insurance Company

Product Name: 992MLIC0908 SERFF Tr Num: MDIC-125838204 State: ArkansasLH TOI: MS05I Individual Medicare Supplement - SERFF Status: Closed State Tr Num: 40407

Standard Plans

Sub-TOI: MS05I.001 Plan A Co Tr Num: KH992ML0908 State Status: Approved-Closed Filing Type: Rate Co Status: Reviewer(s): Stephanie Fowler Author: Karl Hug Disposition Date: 10/29/2008 Date Submitted: 09/30/2008 Disposition Status: Approved

Implementation Date Requested: 03/01/2009 Implementation Date: 03/01/2009

State Filing Description:

## **General Information**

Project Name: Status of Filing in Domicile: Pending

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact: 8%

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 10/29/2008

State Status Changed: 10/29/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

RE: Annual Filing of Standardized Medicare Experience and Rates for Policy Forms ML-MS992A, ML-MS992C, ML-

MS992F and ML-MS992G

This filing includes the experience of the company and the supporting actuarial memorandum. Current and proposed rate schedules are also included.

SERFF Tracking Number: MDIC-125838204 State: Arkansas
Filing Company: Medico Life Insurance Company State Tracking Number: 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 992MLIC0908

Project Name/Number:

The submission includes a request for an 8% rate increase. Subject to your approval, the increase would be implemented after proper notification of the insureds.

Thank you for your review and approval of this filing. If you have any questions, please feel free to contact me.

## **Company and Contact**

### **Filing Contact Information**

Karl Hug, Compliance Analyst khug@gomedico.com 1515 S. 75th Street (800) 695-5976 [Phone] Omaha, NE 68124 (402) 391-4858[FAX]

**Filing Company Information** 

Medico Life Insurance Company CoCode: 71471 State of Domicile: Nebraska
1515 S. 75th Street Group Code: 364 Company Type: Life and Health

Omaha, NE 68124 Group Name: Medico Life State ID Number:

(800) 695-5976 ext. [Phone] FEIN Number: 47-0520541

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## **Filing Fees**

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: one rate filing on closed block Med Supp = \$50.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Medico Life Insurance Company \$50.00 09/30/2008 22827173

 SERFF Tracking Number:
 MDIC-125838204
 State:
 Arkansas

 Filing Company:
 Medico Life Insurance Company
 State Tracking Number:
 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 992MLIC0908

Project Name/Number:

## **Correspondence Summary**

## **Dispositions**

Status	Created By	Created On	Date Submitted
Approved	Stephanie Fowler	10/29/2008	10/29/2008

 SERFF Tracking Number:
 MDIC-125838204
 State:
 Arkansas

 Filing Company:
 Medico Life Insurance Company
 State Tracking Number:
 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Standard Plans Sub-TOI: MS051.001 Plan A

Product Name: 992MLIC0908

Project Name/Number: /

## **Disposition**

Disposition Date: 10/29/2008

Implementation Date: 03/01/2009

Status: Approved

Comment: We have approved the requested 8% rate increase to be implemented on or after March 1, 2009. This approval is subject to the following:

Increases will not be given more frequently than once in a twelve-month period.

Company Name:	Overall % Rate	Written Premium	# of Policy	Premium:	Maximum %	Minimum %	Overall %
	Impact:	Change for this	Holders		Change (where	Change (where	Indicated
		Program:	Affected for		required):	required):	Change:
			this				
			Program:				
Medico Life Insurance Company	8.000%	\$1,298	4	\$16,221	%	%	8.000%

SERFF Tracking Number: MDIC-125838204 State: Arkansas

Filing Company: Medico Life Insurance Company State Tracking Number: 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 992MLIC0908

Project Name/Number:

Item Type Item Name Item Status Public Access

Supporting DocumentHealth - Actuarial JustificationApprovedNo

Rate rate sheets Approved Yes

SERFF Tracking Number: MDIC-125838204 State: Arkansas 40407

Filing Company: Medico Life Insurance Company State Tracking Number:

Company Tracking Number: KH992ML0908

MS05I Individual Medicare Supplement - Standard Plans TOI: Sub-TOI: MS05I.001 Plan A

Product Name: 992MLIC0908

Project Name/Number:

## **Rate Information**

Rate data applies to filing.

Filing Method: Serff

**Rate Change Type:** Increase

**Overall Percentage of Last Rate Revision:** 8.000%

**Effective Date of Last Rate Revision:** 03/01/2008

Filing Method of Last Filing: Serff

**Company Rate Information** 

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Premium:	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders		Change (where	Change (where
	Change:		Change for	Affected for this		required):	required):
			this	Program:			
			Program:				
Medico Life Insurance	8.000%	8.000%	\$1,298	4	\$16,221	%	%
Company							

SERFF Tracking Number: MDIC-125838204 State: Arkansas
Filing Company: Medico Life Insurance Company State Tracking Number: 40407

Company Tracking Number: KH992ML0908

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.001 Plan A

Standard Plans

Product Name: 992MLIC0908

Project Name/Number:

## Rate/Rule Schedule

Review Document Name: Affected Form Rate Rate ActionInformation: Attachments

Status: Numbers: Action:\*

(Separated with

commas)

Approved rate sheets ML-MS992A, ML-Revised Previous State Filing 37071 AR\_992NW\_MLI

MS992C, ML- Number: C Rates as MS992F and ML- Percent Rate Change 8 Filed.pdf

MS992G Request:

# Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Standardized Plans A, C, F and G Arkansas

#### **Current Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992A Gross Premium Code: 992AB - Rate Group: 992A MEDICARE SUPPLEMENT

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan A Issue Age Premium

65 & OV 2814.00

AREA FACTORS

A 0.85 B 0.92

C 1.00 D 1.08 E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992A(AR) 10/07

### **Proposed Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992A Gross Premium Code: 992AB - Rate Group: 992A MEDICARE SUPPLEMENT

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan A Issue Age Premium

65 & OV 3039.00

AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08

E 1.17 F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992A(AR) DATE: 8/27/2008

# Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Standardized Plans A, C, F and G Arkansas

#### **Current Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992C Gross Premium Code: 992CB - Rate Group: 992C MEDICARE SUPPLEMENT

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan C Issue Age Premium

65 & OV 4771.00

AREA FACTORS

A 0.85 B 0.92

C 1.00 D 1.08 E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992C(AR) 10/07

### **Proposed Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992C Gross Premium Code: 992CB - Rate Group: 992C MEDICARE SUPPLEMENT

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan C Issue Age Premium

65 & OV 5153.00

AREA FACTORS

A 0.85 B 0.92 C 1.00

C 1.00 D 1.08 E 1.17

F 1.26 G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992C(AR) DATE: 8/27/2008

## Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Standardized Plans A, C, F and G Arkansas

#### **Current Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992F Gross Premium Code: 992FB - Rate Group: 992F MEDICARE SUPPLEMENT

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan F Issue Age Premium

65 & OV 4771.00

#### AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17 F 1.26 G 1.36

OTHER PREMIUM MODES

1.70

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

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Rates certify to a 65% anticipated loss ratio.

MLRS992F(AR) 10/07

### **Proposed Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992F Gross Premium Code: 992FB - Rate Group: 992F MEDICARE SUPPLEMENT

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 08/26/1992 Through 09/01/2007

> Plan F Issue Age Premium

65 & OV 5153.00

#### AREA FACTORS

A 0.85 B 0.92 C 1.00 D 1.08 E 1.17 F 1.26 G 1.36 H 1.70

#### OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992F(AR) DATE: 8/27/2008

# Actuarial Memorandum - Individual A&H Rate Filing Medicare Supplement Standardized Plans A, C, F and G Arkansas

#### **Current Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992G Gross Premium Code: 992GB - Rate Group: 992G MEDICARE SUPPLEMENT

CURRENT RATE SCHEDULE - Arkansas For Forms Issued From 01/22/1993 Through 09/01/2007

> Plan G Issue Age Premium

65 & OV 4599.00

AREA FACTORS

A 0.85 B 0.92

> C 1.00 D 1.08

E 1.17 F 1.26 G 1.36

1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

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Rates certify to a 65% anticipated loss ratio.

MLRS992G(AR) 10/07

### **Proposed Rate Schedule**

MEDICO™ LIFE INSURANCE COMPANY Omaha, Nebraska ML-MS992G Gross Premium Code: 992GB - Rate Group: 992G MEDICARE SUPPLEMENT

PROPOSED RATE SCHEDULE - Arkansas For Forms Issued From 01/22/1993 Through 09/01/2007

> Plan G Issue Age Premium

65 & OV 4967.00

AREA FACTORS

A 0.85 B 0.92 C 1.00

D 1.08 E 1.17 F 1.26

G 1.36 H 1.70

OTHER PREMIUM MODES

Semi-Annual = 6/11 x Annual Quarterly = 3/11 x Annual P.A.C. Monthly = 1/12 x Annual

Rates certify to a 65% anticipated loss ratio.

MLRS992G(AR) DATE: 8/27/2008